| Under the Paperwork Reduction Act of 1995, no persons are re  |  | t and Trademark Office; U.S                 | PTO/SB/22 (01-09)<br>rough 02/28/2009. OMB 0651-0031<br>S. DEPARTMENT OF COMMERCE<br>displays a valid OMB control number |  |
|---|--|---|--|--|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)      |  | Docket Number (Optional)<br>H0610.0384/P384 |  |  |
|   |  |   |  | pplication Number 10/539,604-Conf. #4765 |
| For PROCESS FOR REMOVAL OF SO2 FROM O   | OFF-GASES BY RI                        | EACTION WITH H2O                            | 2  |  |
| Art Unit 1797   |  | Examiner                                    | I. J. Wu   |  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.      |  |   |  |  |
| The requested extension and fee are as follows (check t   | ime period desired                     | and enter the appropria                     | ite fee below):  |  |
| One month (37 CFR 1.17(a)(1))   | <u>Fee</u><br>\$130                    | Small Entity Fee<br>\$65                    | \$   |  |
| Two months (37 CFR 1.17(a)(2))  | \$490                                  | \$245                                       | \$   |  |
| X Three months (37 CFR 1.17(a)(3))  | \$1110                                 | \$555                                       | \$ 1,110.00  |  |
| Four months (37 CFR 1.17(a)(4))   | \$1730                                 | \$865                                       | \$   |  |
| Five months (37 CFR 1.17(a)(5))   | \$2350                                 | \$1175                                      | \$   |  |
| Applicant claims small entity status. See 37 C  A check in the amount of the fee is enclosed.  X Payment by credit card. Form PTO-2038 is a |  |   |  |  |
|   |  |   |  |  |
| The Director has already been authorized to c   | -                                      |   |  |  |
| The Director is hereby authorized to charge a Deposit Account Number 04-1073  | ny fees which may<br>                  | be required, or credit                      | any overpayment, to  |  |
| WARNING: Information on this form may become provide credit card information and authorization of   | oublic. Credit card in<br>on PTO-2038. | formation should not be                     | included on this form.   |  |
| I am the applicant/inventor.  |  |   |  |  |
| assignee of record of the entire Statement under 37 CFR 3   |  |   |  |  |
| attorney or agent of record. Reg  | gistration Number                      | 50,515                                      |  |  |
| attorney or agent under 37 CFR  |  |   |  |  |
| Registration number/if/acting under 37 CFR 1.34   |  |   |  |  |
| Signature   |  | March 9, 2009  Date                         |  |  |
| Stephen A. Soffen   |  |   | rate   |  |
| Gabriela I. Coman   |  |   | (202) 420-4879<br>Telephone Number   |  |
| NOTE: Signatures of all the inventors or assignees of record of the than one signature is required, see below.                              | entire interest or their repr          | ·   |  |  |
| Total of1 forms are subn  | nitted.                                |   |  |  |